

**United States Bankruptcy Court  
District of Massachusetts (Boston)**

**CHAPTER 13 PLAN COVER SHEET**

Filing Date: October 12, 2017 Docket No.: 17-New Case

Debtor: Jacquelyn Anfield

Soc. Sec. No.: xxx-xx-3650

Address: 399 Crescent Street, Fall River, MA 02720

Debtor's Counsel

Robert S. Simonian, Esq.  
Bucacci And Simonian, P.C.  
155 North Main Street  
Fall River, MA 02720  
508-678-4000  
B.B.O. Number 631617

Attached to this cover sheet is the Chapter 13 Plan filed by the Debtor(s) in this case. This plan sets out the proposed treatment of the claims of creditors. The claims are set forth in the bankruptcy schedules filed by Debtor(s) with the Bankruptcy Court.

You will receive a separate notice from the Bankruptcy court of the scheduled Creditor's Meeting pursuant to 11 U.S.C. § 341. That notice will also establish the bar date for filing Proof of Claims.

Pursuant to the Massachusetts Local Bankruptcy Rules, you have until thirty (30) days after the section 341 Meeting to file an objection to confirmation of the Chapter 13 Plan, which objection must be served on the Debtor(s), Debtor's Counsel an the Chapter 13 Trustee.

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS (BOSTON)

CHAPTER 13 PLAN

DEBTOR(S)

Docket Number (New Case)

Jacquelyn Anfield

Soc. Sec. No.: xxx-xx-3650

**I. PLAN PAYMENT AND TERM:**

Debtor(s) shall pay monthly to the Trustee the sum of **\$473.00** for the term of:

\_\_\_\_ 36 Months. 11 U.S.C. § 1325(b)(4)(A)(i);  
\_\_\_\_ 60 Months. 11 U.S.C. § 1325(b)(4)(A)(ii);  
 X  60 Months. 11 U.S.C. § 1322(d)(2). Debtor(s) aver the following cause: Debtor requires a 60 month plan in order to propose a feasible plan and pay her mortgage arrears.

**II. SECURED CLAIMS:**

A. Claims to be paid through the plan (including arrears):

| <u>Creditor</u> | <u>Description of Claim</u><br>(pre-petition arrears, purchase money, etc.) | <u>Amount of Claim</u> |
|-----------------|---|------------------------|
| Seterus         | Pre-petition 1 <sup>st</sup> mortgage                                       | \$20,000.00            |

**Total of secured claims to be paid through the Plan: \$20,000.00**

B. Claims to be paid directly by debtor(s) to creditors (Not through Plan):

| <u>Creditor</u> | <u>Description of Claim</u>            | <u>Amount of Claim</u> |
|-----------------|--|------------------------|
| Seterus         | post petition 1 <sup>st</sup> mortgage | \$176,578.25           |
| Bank of America | post-petition 2 <sup>nd</sup> mortgage | \$7,136.97             |

D. Lease:

- i.) The Debtor(s) intend(s) to reject the residential/personal property lease claims of: \_\_\_\_\_
- ii.) **The Debtor(s) intend(s) to assume the residential/personal property lease claims of: Nissan Infiniti automobile lease 2015 Nissan Altima.**
- iii.) The Arrears under the lease to be paid under the Plan are: \$ \_\_\_\_\_

**III. PRIORITY CLAIMS:**

A. Domestic Support Obligations:

| Creditor | Description of Claim | Amount of Claim |
|----------|----------------------|-----------------|
|----------|----------------------|-----------------|

B. Other Priority Claims:

| Creditor | Description of Claim | Amount of Claim |
|----------|----------------------|-----------------|
|----------|----------------------|-----------------|

|   |         |
|---|---------|
| Total of Priority Claims to be Paid Through Plan: | \$ 0.00 |
|---|---------|

**IV. ADMINISTRATIVE CLAIMS:**

|   |            |
|---|------------|
| A. Attorney Fees (to be paid through the Plan): | \$2,500.00 |
|---|------------|

B. Miscellaneous Fees:

| Creditor | Description of Claim | Amount of Claim |
|----------|----------------------|-----------------|
|----------|----------------------|-----------------|

C. The Chapter 13 Trustee's fee is determined by Order of the United State Attorney General. The calculation of the Plan payment set forth utilizes a 10% Trustee's commission.

**V. UNSECURED CLAIMS:**

The general unsecured creditors shall receive a dividend of n/a% (Pot Plan) of their claims. This is a pot plan and the total to be paid to the unsecured creditors is \$3,000.00.

|                              |              |
|------------------------------|--------------|
| A. General unsecured claims: | \$ 10,085.00 |
|------------------------------|--------------|

B. Undersecured claims arising after lien avoidance / cram down:

| Creditor | Description of Claim | Amount of Claim |
|----------|----------------------|-----------------|
|----------|----------------------|-----------------|

C. Non-Dischargeable Unsecured Claims:

| Creditor | Description of Claim | Amount of Claim |
|----------|----------------------|-----------------|
|----------|----------------------|-----------------|

|                     |                           |             |
|---------------------|---------------------------|-------------|
| Dept. of Ed/Navient | Student loans (aggregate) | \$38,625.00 |
| Sallie Mae          | Student loans (aggregate) | \$79,100.00 |

|  |                      |
|--|----------------------|
| <b>Total of Unsecured Claims: (A+B+C):</b> | <b>\$ 127,810.00</b> |
|--|----------------------|

|   |             |
|---|-------------|
| D. Multiply total by percentage:<br>(Example: Total of \$38,500.00 x .22 dividend = \$8,470.00) | \$ 3,000.00 |
|---|-------------|

E. Separately classified unsecured claims (co-borrower, etc.):

| Creditor | Description of Claim | Amount of Claim |
|----------|----------------------|-----------------|
|----------|----------------------|-----------------|

Total amount of separately classified claims payable at \_\_\_\_% \$ 0.00

**VI. OTHER PROVISIONS:**

- A. Liquidation of assets to be used to fund Plan: n/a  
B. Miscellaneous Provisions: None

**VII. CALCULATION OF PLAN PAYMENT:**

|   |   |                       |
|---|---|-----------------------|
| a. Secured claims (Section I-A total):                    |   | \$ 20,000.00          |
| b. Priority claims (Section II-A & B total):              |   | \$ 0.00               |
| c. Administrative claims (Section III-A & B total):       |   | \$ 2,500.00           |
| d. Regular unsecured claims (Section IV-D total):         |   | \$ 3,000.00           |
| e. Separately classified unsecured claims:                |   | \$ 0.00               |
| f. Total of a + b + c + d + e above:                      | = | \$ 25,500.00          |
| g. Divide (f) by .90 for a total including Trustee's Fee: | = | \$ 28,333.33          |
| <b>Cost of Plan</b>                                       |   | <b>= \$ 28,333.33</b> |

(This represents to total amount to be paid into the Chapter 13 Plan).

- h. Divide (g), Cost of Plan, by the Term of Plan, 60 months = \$ 472.22
- i. **Round up to nearest dollar for Monthly Plan Payment:** \$ 473.00  
(Enter this amount on page 1)

Pursuant to 11 U.S.C. §1326(a)(1) unless the Court orders otherwise, debtor(s) shall commence making the payments proposed by a plan within thirty (30) days after the petition is filed. Pursuant to 11 U.S.C. §1326(a)(1)(C), the debtor(s) shall make pre-confirmation adequate protection payments directly to the secured creditor(s).

**VIII. LIQUIDATION ANALYSIS**

**A. Real Estate:**

| Address                             | Fair Market Value | Total Amount of Recorded Liens (Schedule D) |
|-------------------------------------|-------------------|---|
| 399 Crescent St., Fall River, MA    | \$188,100.00      | \$183,715.22                                |
| Total Net Equity for Real Property: |                   | \$ 4,384.78                                 |

Less Total Exemptions (Schedule C): \$ 4,384.78

**Available Chapter 7:** \$ 0.00

B. Automobile(s):

| <u>(Describe year, make, model):</u> | <u>Value</u> | <u>Lien</u> | <u>Exemption</u> |
|--------------------------------------|--------------|-------------|------------------|
|--------------------------------------|--------------|-------------|------------------|

|                   |  |  |    |
|-------------------|--|--|----|
| Total Net Equity: |  |  | \$ |
|-------------------|--|--|----|

|                                     |  |  |    |
|-------------------------------------|--|--|----|
| Less Total Exemptions (Schedule C): |  |  | \$ |
|-------------------------------------|--|--|----|

**Available Chapter 7:** \$ 0.00

C. All other Assets: (All remaining items on Schedule B: (Itemize as necessary)

|                  |              |
|------------------|--------------|
| Total Net Value: | \$ 36,386.00 |
|------------------|--------------|

|                               |              |
|-------------------------------|--------------|
| Less Exemptions (Schedule C): | \$ 36,386.00 |
|-------------------------------|--------------|

**Available Chapter 7:** \$ 0.00

D. Summary of Liquidation Analysis (total amount available under Chapter 7):

Net Equity ( A and B) plus Other Assets (C) less all claimed Exemptions: \$ 0.00

E. Additional Comments regarding Liquidation Analysis: none

IX. SIGNATURES

Pursuant to the Chapter 13 Rules, the debtor(s) or his/her attorney is required to serve a copy of the Plan upon the Chapter 13 Trustee, all creditors and interested parties, and to file a Certificate of Service accordingly.




/s/ Robert S. Simonian, Esq.

Robert S. Simonian, Esq.  
155 North Main Street  
Fall River, MA 02720  
508-678-4000  
B.B.O. Number 631817

Dated: October 12, 2017

I/WE DECLARE UNDER THE PENALTIES OF PERJURY THAT THE  
FOREGOING REPRESENTATIONS OF FACT ARE TRUE AND CORRECT TO THE  
BEST OF OUR KNOWLEDGE AND BELIEF.

/s/ Jacquelyn Anfield   
Jacquelyn Anfield

Dated: October 12, 2017

**CERTIFICATE OF SERVICE**

I, Robert S. Simonian, Esq., Attorney for the Debtor(s), hereby certify, under the pains and penalties of perjury, that I did serve a copy of the foregoing Chapter 13 Plan upon the following parties by delivering same by first class mail, postage prepaid and / or via the Bankruptcy Court's Electronic Filing System.

**Via Electronic Service:**

1. Trustee Bankowski
2. U.S. Bankruptcy Trustee

**Via First Class Mail:**

See attached service list

Dated: 10/12/17

/s/ Robert S. Simonian, Esq.  
Robert S. Simonian, Esq.  
Bucacci And Simonian, P.C.  
155 N. Main Street  
Fall River, MA 02720  
508-678-4000  
B.B.O. No.: 631817

Bank of America  
PO BOX 26249  
Tampa, FL 33623

Cardmember Service  
PO BOX 6354  
Fargo, ND 58125

Computer Credit, INC  
Claim Deopt 009693  
470 W. Hanes Mill Road  
PO BOX 5238  
Winston Salem, NC 27113-5238

Dept of Ed/Navient  
PO Box 9635  
Wilkes Barre, PA 18773

Dept of Education/Nelnet  
3015 Parker Rd., # 400  
Aurora, CO 80014

Elan Financial Services  
PO Box 108  
Saint Louis, MO 63166

Gragil  
PO BOX 1010  
Pembroke, MA 02359

Gragil Assoc.  
29 Winter St.  
Pembroke, MA 02359

Internal Revenue Service  
Insolvency Groups - Stop 20800  
15 New Sudbury St.  
PO Box 9112  
Boston, MA 02203

Internal Revenue Service  
Centralized Insolvency Operation  
PO Box 7346  
Philadelphia, PA 19101

Macy's  
PO BOX 9001094  
Louisville, KY 40290-1094

Macy's Bankruptcy Dept.  
PO Box 8053  
Mason, OH 45040



Massachusetts Dept. of Revenue  
Bankruptcy Unit  
PO Box 9564  
Boston, MA 02114

Navient  
PO Box 9500  
Wilkes Barre, PA 18773

Navient Solutions  
300 Continental Drive  
Newark, DE 19713

Nissan-Infiniti  
8900 Freeport Pkwy.  
Irving, TX 75063

Salie Mae  
PO Box 9635  
Wilkes Barre, PA 18773

Sallie Mae  
PO BOX 8459  
Philadelphia, PA 19101

Sallie Mae  
PO BOX 3319  
Wilmington, DE 19804

Sallie Mae  
PO BOX 3229  
Wilmington, DE 19804

SallieMae Servicing Corp  
PO BOX 9533  
Wilkes Barre, PA 18773

Sears Credit Card  
PO Box 183081  
Columbus, OH 43218

Sears Credit Cards  
PO BOX 6282  
Sioux Falls, SD 57117

Sears Credit Cards  
PO BOX 6283  
Sioux Falls, SD 57117

Seterus  
PO Box 1077  
Hartford, CT 06143

South Coast Hospital Group  
363 Highland Ave.  
Fall River, MA 02720

SouthCoast Hospital Group  
PO BOX 11357  
Boston, MA 02211

Synch/Arkansas Furniture  
PO BOX 965036  
Orlando, FL 32896

Synchrony Bank  
Attn: Bankruptcy  
PO BOX 965061  
Orlando, FL 32896-5060

Synchrony Bank/Amazon  
PO BOX 960061  
Orlando, FL 32896

Webster Bank  
C/O Cardmember Service  
PO BOX 790408  
Saint Louis, MO 63179-0408

Webster Bank  
PO Box 1809  
Hartford, CT 06144-1809

Webster Bank  
145 Bank Street  
Waterbury, CT 06702

Webster Bank  
Cardmember Services  
PO Box 6335  
Fargo, ND 58125